RENNES HEALTH CENTER-DE PERE

200 SOUTH NINTH STREET

DE PERE	54115	Phone: (920) 336-5680		Ownership:	Corporation
Operated from 1	/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conju	nction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds S	et Up and St	affed (12/31/05):	122	Title 18 (Medicare) Certified?	Yes
Total Licensed B	ed Capacity	(12/31/05):	122	Title 19 (Medicaid) Certified?	Yes
Number of Reside	nts on 12/31	/05:	109	Average Daily Census:	108

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	용
Primary Diagnosis	%	Age Groups 	%	 Less Than 1 Year 1 - 4 Years	54.1 38.5
Developmental Disabilities	0.0	Under 65	0.9	More Than 4 Years	7.3
Mental Illness (Org./Psy)	18.3	65 - 74	3.7	İ	
Mental Illness (Other)	3.7	75 – 84	28.4	İ	100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	50.5		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	16.5	Full-Time Equivalent	
Cancer	5.5			Nursing Staff per 100 Resid	lents
Fractures	19.3		100.0	(12/31/05)	
Cardiovascular	15.6	65 & Over	99.1		
Cerebrovascular	22.9			RNs	9.4
Diabetes	1.8	Gender	%	LPNs	11.4
Respiratory	5.5			Nursing Assistants,	
Other Medical Conditions	7.3	Male	24.8	Aides, & Orderlies	48.6
		Female	75.2	İ	
	100.0	İ		İ	
			100.0	j	

Method of Reimbursement

		edicare			edicaid itle 19			Other]	Private Pay	<u> </u>		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	18	100.0	245	28	100.0	125	0	0.0	0	62	98.4	182	0	0.0	0	0	0.0	0	108	99.1
Intermediate				0	0.0	0	0	0.0	0	1	1.6	182	0	0.0	0	0	0.0	0	1	0.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	18	100.0		28	100.0		0	0.0		63	100.0		0	0.0		0	0.0		109	100.0

RENNES HEALTH CENTER-DE PERE

Admissions, Discharges, and		Percent Distribution	ı of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	7.4	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		74.3	25.7	109
Other Nursing Homes	2.9	Dressing	3.7		81.7	14.7	109
Acute Care Hospitals	79.4	Transferring	11.0		70.6	18.3	109
Psych. HospMR/DD Facilities	0.0	Toilet Use	7.3		78.0	14.7	109
Rehabilitation Hospitals	0.0	Eating	56.9		31.2	11.9	109
Other Locations	0.0	*******	******	*****	*****	* * * * * * * * * * * * * * * * * * * *	*****
Total Number of Admissions	175	Continence		%	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Extern	al Catheter	5.5	Receiving Resp	iratory Care	6.4
Private Home/No Home Health	29.5	Occ/Freq. Incontiner	it of Bladder	55.0	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	3.6	Occ/Freq. Incontiner	it of Bowel	28.4	Receiving Suct	ioning	0.0
Other Nursing Homes	2.4				Receiving Osto	my Care	3.7
Acute Care Hospitals	25.3	Mobility			Receiving Tube	Feeding	2.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	7.3	Receiving Mech	anically Altered Diets	18.3
Rehabilitation Hospitals	0.0					_	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	24.1	With Pressure Sores		2.8	Have Advance D	irectives	88.1
Total Number of Discharges		With Rashes		6.4	Medications		
(Including Deaths)	166				Receiving Psyc	hoactive Drugs	54.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

*************	*****	*****	******	*****	*****	*****	*****	*****	*****
		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.6	85.8	1.10	90.1	1.05	88.8	1.06	88.1	1.07
Current Residents from In-County	97.2	81.3	1.20	84.9	1.15	83.2	1.17	77.6	1.25
Admissions from In-County, Still Residing	33.7	16.8	2.01	18.1	1.87	18.7	1.80	18.1	1.86
Admissions/Average Daily Census	162.0	216.2	0.75	188.0	0.86	177.7	0.91	162.3	1.00
Discharges/Average Daily Census	153.7	217.8	0.71	191.1	0.80	179.2	0.86	165.1	0.93
Discharges To Private Residence/Average Daily Census	50.9	100.9	0.50	87.1	0.58	83.4	0.61	74.8	0.68
Residents Receiving Skilled Care	99.1	97.2	1.02	96.6	1.03	96.3	1.03	92.1	1.08
Residents Aged 65 and Older	99.1	91.5	1.08	90.0	1.10	91.3	1.09	88.4	1.12
Title 19 (Medicaid) Funded Residents	25.7	61.7	0.42	62.3	0.41	61.8	0.42	65.3	0.39
Private Pay Funded Residents	57.8	19.4	2.97	20.8	2.78	22.5	2.57	20.2	2.87
Developmentally Disabled Residents	0.0	0.9	0.00	0.9	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	22.0	28.9	0.76	34.5	0.64	34.8	0.63	32.9	0.67
General Medical Service Residents	7.3	23.7	0.31	22.0	0.33	23.0	0.32	22.8	0.32
Impaired ADL (Mean)	51.0	47.9	1.07	48.8	1.04	48.4	1.05	49.2	1.04
Psychological Problems	54.1	59.1	0.92	59.9	0.90	59.5	0.91	58.5	0.93
Nursing Care Required (Mean)	5.0	7.1	0.71	7.3	0.70	7.2	0.70	7.4	0.68